

Express Mail EB 717452936 US

PTO/SB/17 (10-07)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2008

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,560.00

Complete if Known

Application Number	10/531,531
Filing Date	December 19, 2005
First Named Inventor	Graham, Brian
Examiner Name	Kelley, Robert M.
Art Unit	1633
Attorney Docket No.	13801US

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185
Multiple Dependent Claims		
Total Claims <u>56</u>	Extra Claims	Fee (\$)
<u>42</u> - 20 or HP = <u>0</u> x _____ = <u>0</u>		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.		
Indep. Claims <u>5</u>	Extra Claims	Fee (\$)
<u>2</u> - 3 or HP = <u>0</u> x _____ = <u>0</u>		Fee Paid (\$)
HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	= _____	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) EXT OF TIME; Notice of Appeal 1,560

SUBMITTED BY		Registration No.	Telephone
Signature	<u>Patricia A. Coburn</u>	<u>28,594</u>	<u>614/766-9136</u>
Name (Print/Type)		Date	
<u>Patricia A. Coburn</u>		<u>08/28/2008</u>	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DUPLICATE



PTO/SB/17 (10-07)

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For FY 2008☐ Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$) 1,560.00**Complete if Known**

Application Number	10/531,531
Filing Date	December 19, 2005
First Named Inventor	Graham, Brian
Examiner Name	Kelley, Robert M.
Art Unit	1633
Attorney Docket No.	13801US

METHOD OF PAYMENT (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

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☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee☐ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

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2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
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Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	<u>56</u>	Extra Claims	Fee (\$)	Fees Paid (\$)
<u>42</u> - 20 or HP =	<u>0</u>	x		<u>0</u>

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	<u>5</u>	Extra Claims	Fee (\$)	Fees Paid (\$)
<u>2</u> - 3 or HP =	<u>0</u>	x		<u>0</u>

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<u> </u> - 100 =	<u> </u> / 50 =	<u> </u> (round up to a whole number) x		<u> </u>

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) EXT OF TIME, Notice of Appeal**Fees Paid (\$)**1,560**SUBMITTED BY**

Signature

Patricia A. CoburnRegistration No. 28,594
(Attorney/Agent)

Telephone 614/766-9136

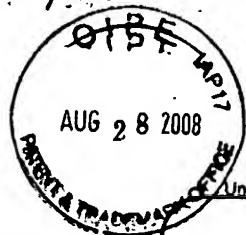
Name (Print/Type)

Patricia A. Coburn

Date 08/28/2008

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/21 (08-08)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

29

Application Number	10/531,531
Filing Date	December 19, 2005
First Named Inventor	Graham, Brian
Art Unit	1663
Examiner Name	Kelley, Robert M.
Attorney Docket Number	13801US

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature	<i>Patricia A. Coburn</i>		
Printed name	Patricia A. Coburn		
Date	August 28, 2008	Reg. No.	28,594

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	<i>Judy Readman</i>		
Typed or printed name	JUDY READMAN	Date	8-28-2008

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Practitioner's Docket No. 13801US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Graham et al.

Application No.: 10/531,531

Group No. 1663

Filed: 12-19-2005

Examiner: Kelly, Robert M.

For: Process for Treating Non-Human Animals

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL CERTIFICATE

"Express Mail" label number EB 717452936 US

Date of Deposit August 28, 2008

I hereby state that the following attached papers or fees

Transmittal Form
Amendment
Petition for Extension of Time
Notice of Appeal
Fee Transmittal (in duplicate)
PTO-2038 Credit Card Payment Form
Express Mail Certificate
Return Receipt Post Card

are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10, on the date indicated above and is addressed to the Commissioner for Patents, Alexandria, Virginia 22313-1450.

Judy Readman

Typed or printed name of person mailing paper or fee

Judy Readman
Signature of person mailing paper or fee

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(Express Mail Certificate [8-3])